



Università degli Studi
Guglielmo Marconi

Faculty of Applied Sciences and Technologies

The objective of the study is the evaluation of the psychological variables of healthcare workers exposed to SARS-CoV-2 in relation to physical discomfort due to the prolonged use of personal protective equipment (PPE). The survey questionnaire was developed ad hoc as part of the research activities of the PhD in “*Physical Sciences and Engineering of Industrial and Energy Innovation*”.

General instructions: Participation in the study consists in completing various questionnaires that evaluate information of a demographic and occupational nature, psychological support during the COVID-19 pandemic, physical discomfort due to the prolonged use of PPE and information on psychological aspects (for example anxiety, stress, insomnia, resilience).

Participation is anonymous, free and completely voluntary. Each questionnaire will be preceded by adequate instructions that will help participants understand what to do. The duration of use required for filling out the questionnaires is about 10 minutes. There is no compensation. The four questionnaires do not provide for any refund. Once the questionnaire is completed, it must be sent through the Google® Forms Platform. Any observations and comments or requests for more information can be sent to the research project manager at the following e-mail address: g.candido@unimarconi.it.

INFORMED CONSENT

“Pursuant to the legislation relating to the protection of personal data (EU Regulation 2016/679 - *General Data Protection Regulation* - GDPR - applicable from 25 May 2018 and in accordance with Legislative Decree 30 June 2003 n. 196 *Code regarding the protection of personal data*), the transmitted data will be collected and stored in an appropriate manner, analyzed in anonymous and aggregate form and will be used exclusively for scientific research purposes”. The research results may be published in aggregate form, therefore the identity of the participants will remain anonymous.

0. By continuing, the will to participate in this research project is confirmed and consent to the processing of the data provided is expressed. *

I agree. (* Required field).

QUESTIONNAIRE 1

Demographic and work information, psychological support during the COVID-19 pandemic and discomforts encountered after prolonged use of PPE

1. **Year of birth:** _____.

2. **Gender:**

Male;

Female.

3. **Work placement:**

Hospital Agency;

University Hospital;

Local Health Authority;

Territorial Services.

4. **Company identification code or name of the Hospital / Healthcare Company:**

_____.

5. **Region of the workplace:**

Abruzzo;

Basilicata;

Calabria;

Campania;

Emilia-Romagna;

Friuli Venezia Giulia;

Lazio;

Liguria;

Lombardy;

Marche;

- Molise;
- Piedmont;
- Puglia;
- Sardinia;
- Sicily;
- Tuscany;
- Trentino-Alto Adige;
- Umbria;
- Valle d'Aosta;
- Veneto.

6. Professional role:

- Physician;
- Nurse;
- Operator social health;
- Technician;
- Researcher / PhD student;
- Trainee or Specializing Student;
- Other.

7. Clinical area of reference:

- Emergency-Urgency;
- Medical;
- Surgical;
- Other.

8. **Do you work in the ICU ward??**

Yes;

No.

9. **Do you work in a ward with COVID-19 patients?**

Yes;

No.

10. **With respect to the risk of exposure to COVID-19, which PPE do you use as a priority?**

Long-sleeved waterproof gown, FFP3 respirators (in a situation of lack combined use of FFP2 respirators + surgical mask), goggles or protective visor (preferable), non-sterile double gloves (use of sterile gloves where necessary), closed sanitary footwear and overshoes - *High Risk*;

FFP2 respirators or surgical mask, long-sleeved water-repellent gown, goggles or protective visor, double non-sterile gloves, sanitary footwear - *Medium Risk*;

PPE provided for the ordinary performance of their duties (uniform, sanitary footwear, etc.), surgical mask - *Low Risk*.

11. **Was psychological support provided during the COVID-19 pandemic?**

Yes;

No.

12. **Does psychological support deem it necessary?**

Yes;

No.

13. Physical discomforts found after prolonged use of PPE:

Information note: this question can have multiple choices; if you select the "No Discomfort" option, please do not select other options (otherwise they will not be considered).

- Vertigo;
- Dyspnea;
- Nausea;
- Micturition desire;
- Retroauricular pain;
- Thirst;
- Discomfort at work (for example, difficulties in communicating with colleagues or patients);
- Physical fatigue;
- Thermal stress;
- No Discomfort.

QUESTIONNAIRE 2

Stress and Anxiety to Viral Epidemic - 9 items (SAVE-9) for Healthcare workers

General instructions: Please answer each question by entering a number from 0 to 4 in the corresponding box (Answer).

Answer

0 - Never

1 - Rarely

2 - Sometimes

3 - Often

4 - Always

Questions:	Answer
1. Are you afraid the virus outbreak will continue indefinitely?	
2. Are you afraid your health will worsen because of the virus?	
3. Are you worried that you might get infected?	
4. Are you more sensitive towards minor physical symptoms than usual?	
5. Are you worried that others might avoid you even after the infection risk has been minimized?	
6. Do you feel skeptical about your job after going through this experience?	
7. After this experience, do you think you will avoid treating patients with viral illnesses?	
8. Do you worry your family or friends may become infected because of you?	
9. Do you think that your colleagues would have more work to do due to your absence from a possible quarantine and might blame you?	

QUESTIONNAIRE 3

Insomnia Severity Index (ISI)

General instructions: Please answer each question by entering a number from 0 to 4 in the corresponding box (Answer).

Answer Question 1	Answer Question 2	Answer Question 3	Answer Question 4	Answer Question 5
0 - None	From 0 (Very Satisfied) to	0 - Not at all Interfering	0 - Not at all Noticeable	0 - Not at all
1 - Mild	4 (Very Dissatisfied)	1 - A Little	1 - Barely	1 - A Little
2 - Moderate		2 - Somewhat	2 - Somewhat	2 - Somewhat
3 - Severe		3 - Much	3 - Much	3 - Much
4 - Very		4 - Very Much Interfering	4 - Very Much Noticeable	4 - Very Much

<p>Question 1:</p> <p>1. Please rate the current (i.e., last 2 weeks) SEVERITY of your insomnia problem(s).</p> <p>a) Difficulty falling asleep.</p> <p>b) Difficulty staying asleep.</p> <p>c) Problem waking up too early.</p>	<p>Answer</p>
<p>Question 2:</p> <p>2. How SATISFIED/dissatisfied are you with your current sleep pattern?</p>	<p>Answer</p>
<p>Questions 3,4,5:</p> <p>3. To what extent do you consider your sleep problem to INTERFERE with your daily functioning (e.g. daytime fatigue, ability to function at work/daily chores, concentration, memory, mood, etc.).</p> <p>4. How NOTICEABLE to others do you think your sleeping problem is in terms of impairing the quality of your life?</p> <p>5. How WORRIED/distressed are you about your current sleep problem?</p>	<p>Answer</p>

QUESTIONNAIRE 4

Resilience Scale (RS-14)

General Instructions: Please answer each question by entering a number from 1 ("Strongly Disagree") to 7 ("Strongly Agree") in the corresponding box (Answer).

Questions:	Answer
1. I usually manage one way or another.	
2. I feel proud that I have accomplished things in life.	
3. I usually take things in stride.	
4. I am friends with myself.	
5. I feel that I can handle many things at a time.	
6. I am determined.	
7. I can get through difficult times because I have experienced difficulty before.	
8. I have self-discipline.	
9. I keep interested in things.	
10. I can usually find something to laugh about.	
11. My belief in myself gets me through hard times.	
12. In an emergency, I am someone people can generally rely on.	
13. My life has meaning.	
14. When I am in a difficult situation, I can usually find my way out of it.	